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NOV 20 2006

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7590

08/22/2006

BAKER &amp; DANIELS LLP

111 E. WAYNE STREET

SUITE 800

FORT WAYNE, IN 46802

11/21/2006 RMEBRAH1 00000024 10736865

01 FC:1501 1400.00 OP  
 02 FC:1504 300.00 OP

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TIMOTHY E. NIEDNAGEL

(Depositor's name)



(Signature)

NOVEMBER 18, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/736,865	12/16/2003	William S. DiPoala	BSS0007	5392

TITLE OF INVENTION: METHOD AND APPARATUS FOR REDUCING FALSE ALARMS DUE TO WHITE LIGHT IN A MOTION DETECTION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/22/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
BOOSALIS, FANI POLYZOS	2884	250-342000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. \_\_\_\_\_

2. BAKER &amp; DANIELS LLP

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROBERT BOSCH GMBH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

STUTTGART, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-0385 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date NOVEMBER 18, 2006

Typed or printed name

TIMOTHY E. NIEDNAGEL

Registration No. 33,266

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